la de la companya de									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003									109651875				
CLAIMS AS FILED - PART I								MALLE	NTITY		OTHE	R THAN	
			(Colum		(Col	(Column 2)		PE [		OF		ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	385.00	OR	BASIC FE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•		,	X\$ 9=	} ·	OR	XS18=		
INDEPENDENT CLAIMS			п	minus 3 =				X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM F	RESENT					145=		OR			
* If the difference in column 1 is less than zero, enter "(					"0" in	column 2	L_	OTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II							Α.	ואב	<del></del>	JOH		THAN	
١.	(Column 1) (Column 2) (Column 3)						SI	MALL E	YTITM	OR	OTHER SMALL		
	CLAIMS REMAINING		HIGHE		EST	T		T	ADDI-	7		ADDI-	
AMENDMENT A		AFTER AMENDMENT		PREVIO	USLY	JSLY EXTRA		ATE .	TIONAL FEE		RATE	TIONAL	
	Total	* O	Minus	PAID F	-OH	=7	X	\$ 9 <sub>=</sub>	· · · · · · ·	OR	_X\$18=	1 1-1-	
	Independent	. 7	Minus	*** 14	0	1	-	43=			<u> </u>	17.77-	
A	FIRST PRESENTATION OF MULTIPLE			E DEPENDENT CLAIM				43=		OR	X86=		
							+1	45=		OR	+290=		
								TOTAL T. FEE		OR ,	TOTAL ADDIT. FEE		
						0011.122.							
AMENDMENT B		CLAIMS REMAINING		HIGHE	ER PRE	PRESENT		•	ADDI-	ſ		ADDI-	
		AFTER AMENDMENT		PREVIOU PAID F		EXTRA:	R/	RATE - 1	TONAL FEE		RATE	TIONAL FEE	
	Total -	*	Minus	##,		=	X\$	.9=		OR	X\$18=		
	Independent	*	Minus	414		=	X4	3=		OR	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1						
							+14			OR	+290=	i as a	
							T ADDIT	OTAL FEE		OR A	DOIT, FEE		
	A Property of the Control of the Con	(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum	n 2)	(Column 3)							
AMENDMENT C	77	CLAIMS REMAINING		HIGHE NUMBI		PRESENT		1	ADDI-		2.3	ADDI-	
		AFTER A' ENDMENT		PREVIOL PAID F		EXTRA	RA		ONAL FEE		RATE"	TIONAL FEE	
	Total	•	Minus	<b>d</b> d		<b>.</b>	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4;	3=			X86=		
	FIRST-PRESENTATION OF MULTIPLE DEPENDENT CLAIM.									ЭR-	********	**************************************	
									C	OR _	+290=		
** [	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AC	TOTAL DOTT. FEE		
		mber Previously Paid ber Previously Paid						•	oriate pox i		•	İ	